

36
10
12
58

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO. <u>10/607-6524</u>	FILING DATE
APPLICANT(S)								
CLAIMS								
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			
	IND	DEP	IND	DEP	IND	DEP		
1	1		1				51	
2		1		1			52	
3	1						53	
4		1					54	
5	1						55	
6		1					56	
7	1						57	
8	1						58	
9	1						59	
10		1					60	
11	1						61	
12		1					62	
13		1					63	
14	1						64	
15		1					65	
16		1					66	
17		1					67	
18	1						68	
19		1					69	
20		1					70	
21		1					71	
22		1					72	
23		1					73	
24		1					74	
25		1					75	
26		1					76	
27		1					77	
28							78	
29							79	
30							80	
31							81	
32							82	
33							83	
34							84	
35							85	
36							86	
37							87	
38							88	
39							89	
40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	9		1				TOTAL IND.	
TOTAL DEP.	58		21				TOTAL DEP.	
TOTAL CLAIMS	67		22				TOTAL CLAIMS	